

Program # 50021 - Juvenile Secure Residential A&D Treatment (RAD)

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Priority: Safety Lead Agency: Community Justice

Program Offer Type: Existing Operating Program Contact: Wayne Scott

Related Programs: 50011, 50013, 50014, 50016, 50020, 50023A, 50023B

Program Characteristics: Joint Offer

Executive Summary

The Residential Alcohol and Drug (RAD) Program is a secure residential treatment program for high-risk probation youth with serious drug and alcohol abuse and mental health problems. Youth receive mental health, addiction and life skill services, family counseling, attend school and participate in pro-social activities that support sobriety and teach accountability for criminal behavior. RAD served 80 youth this year. It is a "last chance" resource for youth who cannot succeed in community-based treatment, continue to re-offend and are facing commitment to a youth correctional facility (YCF). Last year, youth had 77.5% fewer arrests post-treatment compared to pre-treatment. CORRECTIONS HEALTH: delivers medical, mental health and dental care for RAD youth. Nurses provide 16 hour emergency response, evaluation, treatment, essential medications and health education.

Program Description

RAD is an 18 bed secure residential treatment unit located in DCJ's detention facility, the Donald E. Long Home (DELH). The program is located in a locked facility to prevent highly addicted and impulsive clients from running away. The program length of stay is from 60 to 120 days. RAD serves 18 youth at a time. It is co-managed by DCJ and Morrison Child and Family Services. RAD provides evidence-based drug and alcohol abuse and mental health services to high-risk male and female juvenile probationers. Typically, RAD clients are too delinquent to be served safely in the community, have histories of running away from treatment, continue to re-offend and are often at imminent risk of commitment to a State correctional facility. At any given time 50-75% of RAD clients are gang members. While in treatment, youth attend school, receive addiction treatment, mental health services, life skills training and participate in prosocial activities that support sobriety and hold youth accountable for their high-risk, criminal behaviors. Evidence-based practices support effectively treating troubled youth according to their level of risk to the public. Research shows that mainstreaming high-risk delinquents (e.g. RAD clients) into community treatment programs exposes less sophisticated, more vulnerable teens to criminal behaviors and safety issues. RAD differs from community-based A&D treatment programs by addressing delinquency as well as addiction. RAD also provides client-specific transition plans based on the clinical assessment with the intent to support sobriety and reduce re-offending.

Program Justification

National reports increasingly underscore the need to intervene in juvenile alcohol and drug abuse. A substantial body of research shows that correctional drug treatment programs (e.g. RAD) lower re-offense rates and the use of juvenile detention (Field, 1995; Schwartz et. al., 1996; Wexler et. al., 1990; Dennis, 2007). RAD is tailored to address the unique treatment and safety issues of high-risk probation youth who have not been able to succeed in or are not appropriate for community-based treatment programs. As a result, RAD reduces the number of youth who remain in the justice system and later commit crimes as adults; last year 55% of the youth treated in RAD stayed crime-free in the year following treatment. CORRECTIONS HEALTH goals are: to ensure that DELH youth are not medically harmed; are medically and mentally stabilized and that they are treated humanely. Suicide prevention is the primary goal.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY06-07)	Current Year Purchased (FY07-08)	Current Year Estimate (FY07-08)	Next Year Offer (FY08-09)
Output	Number of youth served by RAD	72	65	102	75
Outcome	Percent of youth who did not recidivate one year post program exit	55.0%	60.0%	61.0%	60.0%
Outcome	Percent of youth receiving mental health medications	53.0%	75.0%	75.0%	75.0%

Performance Measure - Description

The FY07 number is an average as raw data regarding mental health drugs at DELH was not kept for the fiscal year. Recidivism is based on new criminal referrals.

Legal/Contractual Obligation

ORS 419C.001 mandates juvenile systems to provide services that emphasize the prevention of further criminal activity by the use of early and certain reformation and rehabilitation programs. ORS 419.441 authorizes the juvenile court to order that a youth offender undergo evaluation. If warranted, the court may order the youth to undergo appropriate care or treatment. Because of their impulsive runaway behaviors, these youth are retained in RAD and SRTP more effectively if routine healthcare is offered in the facility. On-site healthcare also increases collaboration with contracted mental health and psychiatric staff.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2008	2008	2009	2009
Personnel	\$54,415	\$778,148	\$56,144	\$762,248
Contracts	\$360,101	\$513,435	\$301,414	\$571,332
Materials & Supplies	\$16,617	\$72,497	\$18,400	\$9,986
Internal Services	\$213,394	\$123,564	\$237,719	\$112,736
Capital Outlay	\$1,994	\$0	\$0	\$0
Subtotal: Direct Exps:	\$646,521	\$1,487,644	\$613,677	\$1,456,302
Administration	\$137,426	\$33,477	\$116,557	\$34,922
Program Support	\$374,107	\$3,644	\$369,261	\$3,212
Subtotal: Other Exps:	\$511,533	\$37,121	\$485,818	\$38,134
Total GF/non-GF:	\$1,158,054	\$1,524,765	\$1,099,495	\$1,494,436
Program Total:	\$2,68	2,819	\$2,593,931	
Program FTE	0.40	9.00	0.40	9.00
Program Revenues				
Indirect for dep't Admin	\$79,173	\$0	\$72,273	\$0
Intergovernmental	\$10,467	\$1,487,644	\$8,000	\$1,456,302
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$89,640	\$1,487,644	\$80,273	\$1,456,302

Explanation of Revenues

County General Fund \$605,677 plus Detention Bed contract with Clackamas and Washington County to Corrections Health \$8,000; State Juvenile Crime Prevention (JCP)\$721,969; For youth enrolled in Oregon Health Plan, costs are offset from Behavioral Rehabilitation Services (BRS), a form of Medicaid \$734,333.

Significant Program Changes

Last year this program was: #50020, Juvenile Secure Residential A&D Treatment (RAD)